

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-79

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒

GAS WELL ☐

OTHER ☐

Name of Operator

Amoco Production Company

Address of Operator

P. O. Box 68 Hobbs, NM 88240

Location of Well

UNIT LETTER G 1980 FEET FROM THE North LINE AND 1980 FEET FROM  
THE East LINE, SECTION 14 TOWNSHIP 19-S RANGE 35-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3764.9' GL

5a. Indicate Type of Lease

State ☐

Fee ☒

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name

Robinson Com.

9. Well No.

1

10. Field and Pool, or Wildcat

Wildcat Strawn

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOBS ☐

OTHER ☐

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

16. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Propose to test the Strawn horizon per the following:

Set a cast iron bridge plug at 11800' and cap with 35' cement. Perforate 11420'-11478' with 2 JSPF. Acidize with 7000 gal. 15% HCL acid. Swab back well and test.

0+4-NMOCD, H

1-Hou

1-Susp

1-W. Stafford, Hou

1-LB6

16. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED

*Benton Green*

TITLE

Assist. Admin. Analyst

DATE

3-23-81

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAR 23 1981

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section

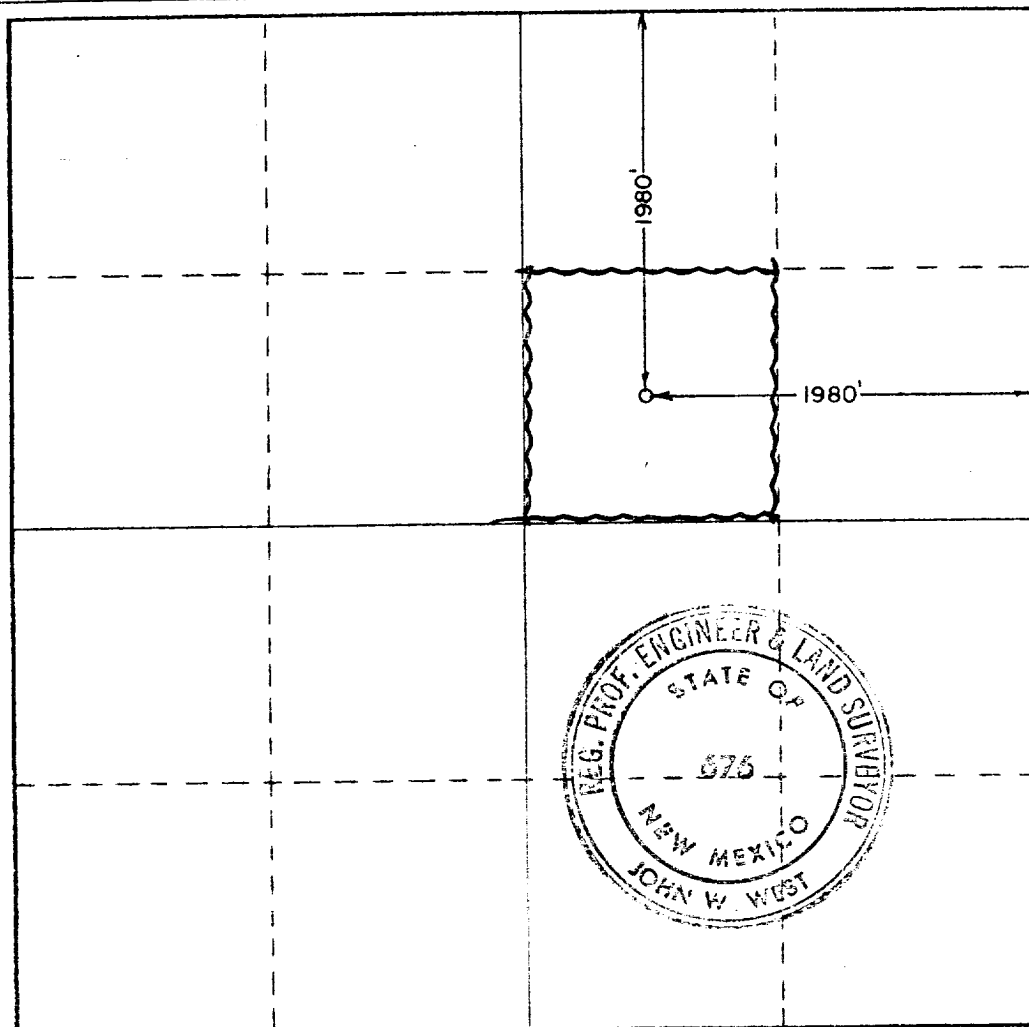
Operator <b>AMOCO Production Co.</b>			Lease <b>Robinson Com</b>		Well No. <b>1</b>
Tract Letter <b>G</b>	Section <b>14</b>	Township <b>19 South</b>	Range <b>35 East</b>	County <b>Lea</b>	
Actual Portage Location of Well: <b>1980</b> feet from the <b>North</b> line and <b>1980</b> feet from the <b>East</b> line					
Ground Level Elev. <b>3764.9</b>	Producing Formation <b>Strawn</b>	Pool <b>Wildcat Strawn</b>	Dedicated Acreage: <b>40</b> Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name *Benjamin Green*  
Position **Assist. Admin. Analyst**

Company **Amoco Production Company**

Date **3-23-81**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed **July 11, 1980**

Registered Professional Engineer and/or Land Surveyor

*John W. West*  
Certificate No. **JOHN W. WEST 675**  
**PATRICK A. ROMERO 8603**  
**Ronald J. Eidson 3232**

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600 6930 7260 7590 7920 8250 8580 8910 9240 9570 9900